

MAIL CERTIFICATION FORMS TO:

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD
SAN DIEGO REGION
9174 Sky Park Court, Suite 100
San Diego, CA 92123
Attention: Land Discharge Unit Supervisor



Notice of Intent to Establish Temporary Wildfire Waste Staging Operation Pursuant to Resolution No. R9-2003-0391: Attachment No. 1

Responsible Party and Facility Location Information

Name of Property Owner/Discharger:			
Mailing Address:			
City:	County:	State:	Zip:
Facility Contact Name:		Phone:	
Name of Temporary Waste Staging Facility:			
Facility Address:			
City:	County:	State:	Zip:
Facility Contact Name:		Phone:	

Certification Statement

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Print Name: _____

Title: _____

Signature: _____

Date: _____